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Title 63. Public Health and Safety

■Oklahoma Statutes Citationized

☐Title 63. Public Health and Safety

Chapter 62B - Supplemental Hospital Offset Payment Program Act

Section 3241.2 - Definitions

Cite as: O.S. §, ____

As used in the Supplemental Hospital Offset Payment Program Act:

- 1. "Authority" means the Oklahoma Health Care Authority;
- 2. "Base year" means a hospital's fiscal year as reported in the Medicare Cost Report or as determined by the Authority if the hospital's data is not included in the Medicare Cost Report. The base year data will be used in all assessment calculations;
- 3. "Net hospital patient revenue" means the gross hospital revenue as reported on Worksheet G-2 (Columns 1 and 2, Lines "Total inpatient routine care services", "Ancillary services", and "Outpatient services") of the Medicare Cost Report, multiplied by the hospital's ratio of total net to gross revenue, as reported on Worksheet G-3 (Column 1, Line "Net patient revenues") and Worksheet G-2 (Part I, Column 3, Line "Total patient revenues");
- 4. "Hospital" means an institution licensed by the **State Department of Health** as a hospital pursuant to Section 1-701.1 of Title 63 of the Oklahoma Statutes maintained primarily for the diagnosis, treatment, or care of patients;
- 5. "Hospital Advisory Committee" means the Committee established for the purposes of advising the Oklahoma Health Care Authority and recommending provisions within and approval of any state plan amendment or waiver affecting hospital reimbursement made necessary or advisable by the Supplemental Hospital Offset Payment Program Act. In order to expedite the submission of the state plan amendment required by Section 3241.6 of this title, the Committee shall initially be appointed by the Executive Director of the Authority from recommendations submitted by a statewide association representing rural and urban hospitals. The permanent Committee shall be appointed no later than thirty (30) days after November 1, 2011, and shall be composed of five (5) members to serve until December 31, 2014, from lists of names submitted by a statewide association representing rural and urban hospitals, as follows:
- a. one member, appointed by the Governor, who shall serve as chairman, and
- b. two members appointed each by the President Pro Tempore of the Oklahoma State Senate and the Speaker of the Oklahoma House of Representatives.

Membership shall be extended until December 31, 2017, for those members who are serving as of December 31, 2014;

- 6. "Medicaid" means the medical assistance program established in Title XIX of the federal Social Security Act and administered in this state by the Oklahoma Health Care Authority;
- 7. "Medicare Cost Report" means the Hospital Cost Report, Form CMS-2552-96 or subsequent versions;
- 8. "Upper payment limit" means the maximum ceiling imposed by 42 C.F.R., Sections 447.272 and 447.321 on hospital Medicaid reimbursement for inpatient and outpatient services, other than to hospitals owned or operated by state government; and
- 9. "Upper payment limit gap" means the difference between the upper payment limit and Medicaid payments not financed using hospital assessments made to all hospitals other than hospitals owned or operated by state government.

Historical Data

Laws 2011, HB 1381, c. 228, § 2; Amended by Laws 2013, HB 1031, c. 132, § 1, eff. November 1, 2013 (<u>superseded document</u> available).

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